

County: Waukesha
 LINDEN GROVE - NEW BERLIN
 13755 WEST FIELDPOINTE DRIVE

Facility ID: 5210

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NEW BERLIN 53151 Phone:(262) 796-3660
 Operated from 1/1 To 12/31 Days of Operation: 365
 Operate in Conjunction with Hospital? Yes
 Number of Beds Set Up and Staffed (12/31/02): 135
 Total Licensed Bed Capacity (12/31/02): 135
 Number of Residents on 12/31/02: 118

Ownership: Non-Profit Corporation
 Highest Level License: Skilled
 Operate in Conjunction with CBRF? No
 Title 18 (Medicare) Certified? Yes
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 119

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		47.5
Supp. Home Care-Personal Care	No	-----		-----		1 - 4 Years		37.3
Supp. Home Care-Household Services	No	Developmental Disabilities	1.7	Under 65	1.7	More Than 4 Years		15.3
Day Services	No	Mental Illness (Org./Psy)	23.7	65 - 74	5.1			-----
Respite Care	Yes	Mental Illness (Other)	3.4	75 - 84	28.0			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	54.2	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.7	95 & Over	11.0	Full-Time Equivalent		
Congregate Meals	No	Cancer	3.4		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	5.1		100.0	(12/31/02)		
Other Meals	No	Cardiovascular	12.7	65 & Over	98.3	-----		
Transportation	No	Cerebrovascular	16.1		-----	RNs		11.5
Referral Service	No	Diabetes	0.8	Sex	%	LPNs		7.9
Other Services	No	Respiratory	5.1	-----		Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	26.3	Male	30.5	Aides, & Orderlies		
Mentally Ill	No		-----	Female	69.5	53.3		
Provide Day Programming for			100.0		-----			
Developmentally Disabled	Yes				100.0			

Method of Reimbursement

			Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care			Total Resi- dents	% Of All
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%		
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Skilled Care	21	100.0	317	47	74.6	119	0	0.0	0	34	100.0	190	0	0.0	0	0	0.0	0	0	0.0	102	86.4
Intermediate	---	---	---	15	23.8	99	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	15	12.7
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	1	1.6	157	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	1	0.8
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	21	100.0		63	100.0		0	0.0		34	100.0		0	0.0		0	0.0		0	0.0	118	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02			

Percent Admissions from:		Activities of	%	% Needing Assistance of One Or Two Staff	Total Number of Residents
Private Home/No Home Health	2.6	Daily Living (ADL)	Independent		
Private Home/With Home Health	1.6	Bathing	0.0	76.3	23.7
Other Nursing Homes	2.3	Dressing	12.7	70.3	16.9
Acute Care Hospitals	89.7	Transferring	18.6	63.6	17.8
Psych. Hosp.-MR/DD Facilities	0.3	Toilet Use	11.9	66.9	21.2
Rehabilitation Hospitals	1.6	Eating	50.0	23.7	26.3
Other Locations	1.9	*****			
Total Number of Admissions	310	Continence	%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	9.3	Receiving Respiratory Care	10.2
Private Home/No Home Health	19.9	Occ/Freq. Incontinent of Bladder	54.2	Receiving Tracheostomy Care	0.0
Private Home/With Home Health	15.5	Occ/Freq. Incontinent of Bowel	48.3	Receiving Suctioning	0.0
Other Nursing Homes	3.5			Receiving Ostomy Care	0.0
Acute Care Hospitals	11.4	Mobility		Receiving Tube Feeding	2.5
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	3.4	Receiving Mechanically Altered Diets	18.6
Rehabilitation Hospitals	0.3			Other Resident Characteristics	
Other Locations	15.2	Skin Care		Have Advance Directives	86.4
Deaths	34.2	With Pressure Sores	8.5	Medications	
Total Number of Discharges		With Rashes	2.5	Receiving Psychoactive Drugs	22.9
(Including Deaths)	316				

Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities

	This Facility %	Other Hospital- Based Facilities %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	88.1	87.4	1.01	85.1	1.04
Current Residents from In-County	74.6	84.3	0.88	76.6	0.97
Admissions from In-County, Still Residing	13.9	15.2	0.91	20.3	0.68
Admissions/Average Daily Census	260.5	213.3	1.22	133.4	1.95
Discharges/Average Daily Census	265.5	214.2	1.24	135.3	1.96
Discharges To Private Residence/Average Daily Census	94.1	112.9	0.83	56.6	1.66
Residents Receiving Skilled Care	86.4	91.1	0.95	86.3	1.00
Residents Aged 65 and Older	98.3	91.8	1.07	87.7	1.12
Title 19 (Medicaid) Funded Residents	53.4	65.1	0.82	67.5	0.79
Private Pay Funded Residents	28.8	22.6	1.27	21.0	1.37
Developmentally Disabled Residents	1.7	1.5	1.17	7.1	0.24
Mentally Ill Residents	27.1	31.3	0.87	33.3	0.81
General Medical Service Residents	26.3	21.8	1.21	20.5	1.28
Impaired ADL (Mean)*	51.5	48.9	1.05	49.3	1.05
Psychological Problems	22.9	51.6	0.44	54.0	0.42
Nursing Care Required (Mean)*	5.3	7.4	0.71	7.2	0.74